

2002 School Health Profiles

A Comparison of Montana and National Data

Prepared by

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Introduction

In 1995, the Centers for Disease Control and Prevention (CDC) collaborated with state, territory, and local education and health agencies to develop the School Health Education Profiles. At that time, the survey assessed mainly health education and some school policies primarily related to HIV/AIDS prevention. Based on input from education and health agencies, the survey evolved to provide a more comprehensive assessment of school health programs. In 2002, new topics were added to assess the areas of physical education and activity, nutrition and food service, and asthma. To reflect more accurately this expansion in the survey's content, the word "education" was dropped from the title of the survey. Thus the new name for the survey is the School Health Profiles (Profiles).

This broad focus now provides at least some information on six of the eight components of the Coordinated School Health Program (CSHP). The six components of CSHP assessed by Profiles are as follows:

- Health education,
- Physical education,
- Health services,
- Food service,
- School policy and environment, and
- Family and community involvement.

This report summarizes data from the 2002 Profiles. Principals' surveys were completed successfully in 43 states, and lead health education teachers' surveys were completed successfully in 42 states. In Montana, 255 principals and teachers were mailed the Profiles survey, with 77 percent of each group returning the surveys. The Montana percentages noted in this report reflect weighted data and are used in comparison with the state median data from the participating states.

The following report is a summary of data in table format. The 2002 Montana School Health Profiles report is available in its entirety and can be downloaded at www.opi.state.mt.us/SHP.

Table 1. Percentage of Schools That **Required Health Education in Grades 6-12 and, Among Those Schools, Percentages That Taught One or More Separate Required Health Education Courses.** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Required health education	95.2	92.3
Taught one or more separate required health education courses	95.3	93.7

Table 2. Percentage of Schools That **Required Teachers to Use Standards, a Specific Curriculum, Guidelines, Framework, or Other Selected Materials.** [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
National Health Education Standards	40.3	38.9
State, district, or school curriculum, guidelines, or framework	93.7	95.9
Materials from health organizations	33.5	36.1
Commercial teacher's guide	42.8	49.4

Table 3. Percentage of Schools That Tried to **Increase Student Knowledge, by Specific Health-Related Topic**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National		Montana	National
Accident or injury prevention	88.0	90.9	Human sexuality	80.1	88.9
Alcohol or other drug-use prevention	98.5	98.9	Immunization and vaccinations	60.2	62.4
Consumer health	79.7	80.3	Nutrition and dietary behavior	98.0	98.1
CPR	66.6	65.6	Personal hygiene	88.0	84.8
Death and dying	54.4	56.3	Physical activity and fitness	99.5	98.6
Dental and oral health	63.3	63.3	Pregnancy prevention	72.5	84.5
Emotional and mental health	89.8	95.2	STD prevention	82.0	92.3
Environmental health	75.4	72.8	Suicide prevention	65.0	73.4
First aid	77.5	76.0	Sun safety	73.0	71.9
Growth and development	87.5	92.9	Tobacco-use prevention	98.1	99.1
HIV prevention	92.9	97.2	Violence prevention	82.6	87.0

Table 4. Percentage of Schools That Tried to **Improve Specific Student Skills**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Accessing health information	87.0	86.6
Advocating for health	82.7	81.6
Analysis of media messages	82.1	84.9
Communication	91.4	93.5
Decision making	95.6	97.7
Goal setting	91.1	93.4
Conflict resolution	89.5	88.2
Resisting peer pressure	95.6	97.2
Stress management	86.1	89.5

Table 5. Percentage of Schools That **Taught Specific Topics Related to Tobacco-Use Prevention**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Addictive effects of nicotine	94.4	97.3
Benefits of not smoking cigarettes	95.7	97.6
Benefits of not using smokeless tobacco	93.0	93.0
Health consequences of cigarette smoking	96.8	98.5
Health consequences of smokeless tobacco use	94.9	94.9
Health effects of environmental tobacco smoke (ETS)	94.8	95.9
Number of illnesses and deaths related to tobacco use	94.4	94.5
Risks of cigar or pipe smoking	83.1	87.9
Influence of families on tobacco-use	87.7	91.4
Influence of media on tobacco-use	90.7	95.5
Social or cultural influences on tobacco-use	88.4	90.0
How students can influence others to prevent tobacco use	84.2	88.1
How students can influence others to quit using tobacco	82.7	85.0
How many young people use tobacco	93.0	92.8
How to find information on tobacco-use cessation	74.8	72.8
Making a personal commitment not to use tobacco	74.4	73.3
How to say no to tobacco use	92.8	95.0

Table 6. Percentage of Schools That **Taught Specific Topics Related to HIV/AIDS Prevention**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Abstinence to avoid HIV infection	85.9	95.0
How HIV is transmitted	87.4	95.1
How HIV affects the body	86.9	94.7
How to correctly use a condom	32.7	40.4
Condom efficacy	64.6	71.4
Number of young people who get HIV	82.6	85.2
Influence of alcohol or other drugs on HIV-related risk behaviors	85.9	89.9
Social or cultural influence on HIV-related risk behaviors	76.9	82.9
How to find valid information on HIV	74.9	76.8
Compassion for persons with HIV or AIDS	78.3	82.2

Table 7. Percentage of Schools That **Taught Specific Topics Related to Nutrition and Dietary Intake**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Benefits of healthy eating	96.5	95.4
Using food labels	85.8	86.4
Food guide pyramid	91.6	90.8
Choosing a variety of grains, especially whole grains	86.3	84.7
Choosing a variety of fruits and vegetables	90.8	88.6
Choosing a low-fat diet	88.6	88.6
Using less salt	75.6	78.1
Moderating intake of sugars	92.4	87.5
Eating more calcium-rich foods	83.5	80.7
Keeping food safe to eat	73.9	74.1
Preparing healthy meals and snacks	86.4	81.5
Aiming for a healthy weight, balancing food intake and physical activity	93.8	91.5
Risks of unhealthy weight-control practices	92.2	89.7
Accepting body size differences	90.4	87.5
Eating disorders	90.0	90.0

Table 8. Percentage of Schools That **Taught Specific Topics Related to Physical Activity**.
[School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Physical, psychological, or social benefits	96.6	93.1
Health-related fitness	95.2	88.6
Phases of a workout	96.2	83.6
How much physical activity is enough	87.4	81.5
Decreasing sedentary activities	88.1	83.2
Overcoming barriers to physical activity	78.7	67.8
Developing an individualized physical activity plan	69.4	65.9
Monitoring progress toward reaching goals	70.9	61.0
Opportunities for physical activity in the community	79.8	71.0
Preventing injury during physical activity	94.3	82.6
Weather-related safety	84.3	80.1
Dangers of performance-enhancing drugs (steroids)	87.1	88.2

Table 9. Percentage of Schools That **Used Specific Teaching Methods**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Group discussions	98.0	98.9
Cooperative group activities	95.1	96.1
Role play	77.0	83.3
Language, performing, or visual arts	65.6	65.9
Pledges or contracts	39.7	44.6
Adult guest speakers	78.8	83.5
Peer educators	56.5	56.5
The Internet	73.8	80.0
Computer-assisted instruction	57.5	55.8

Table 10. Percentage of Schools in Which a **Specific Person Was Responsible for Coordinating Health Education**, by Type of Position. [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
School district administrator	16.1	25.0
School administrator	15.6	18.5
Health education teacher	62.0	44.5
School nurse	1.2	1.8
Other	2.1	3.8
No coordinator	3.0	5.1

Table 11. Percentage of Schools in Which **Health Education Staff Planned or Coordinated Health-Related Projects or Activities with Other Groups**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Physical education staff	86.1	70.8
School health services staff	55.1	66.7
School mental health staff	52.9	56.5
Food service staff	26.1	21.1
Community members	52.0	56.2

Table 12. Percentage of Schools in Which the **Lead Health Education Teacher Had Professional Preparation, by Specific Discipline**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Health and physical education	63.8	46.8
Health only	1.8	7.1
Physical education only	10.7	13.2
Science or other education degree	16.9	11.5
Nursing or counseling	2.5	4.6
Another discipline	4.4	8.3

Table 13. Percentage of Schools in Which the **Lead Health Education Teacher Had Received Staff Development During the Preceding 2 Years.** [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National		Montana	National
Accident or injury prevention	48.2	40.2	Human sexuality	35.0	31.3
Alcohol or other drug-use prevention	57.4	50.8	Immunization and vaccinations	13.9	16.6
Consumer health	17.0	15.4	Nutrition and dietary behavior	31.5	26.6
CPR	66.8	60.7	Personal hygiene	13.7	11.6
Death and dying	13.9	12.2	Physical activity and fitness	46.6	40.9
Dental and oral health	12.2	8.6	Pregnancy prevention	26.2	26.2
Emotional and mental health	30.5	32.9	STD prevention	38.1	38.1
Environmental health	12.8	15.1	Suicide prevention	21.6	22.7
First aid	66.4	53.6	Sun safety	13.7	11.4
Growth and development	24.6	23.4	Tobacco-use prevention	57.1	38.1
HIV prevention	54.3	47.8	Violence prevention	51.2	51.2

Table 14. Percentage of Schools in Which the **Lead Health Education Teacher Wanted Staff Development**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National		Montana	National
Accident or injury prevention	49.8	49.8	Human sexuality	58.4	57.4
Alcohol or other drug-use prevention	65.3	67.5	Immunization and vaccinations	48.6	43.8
Consumer health	47.5	49.3	Nutrition and dietary behavior	66.6	61.9
CPR	61.3	61.3	Personal hygiene	41.3	40.8
Death and dying	59.2	55.6	Physical activity and fitness	66.0	59.6
Dental and oral health	42.7	36.1	Pregnancy prevention	54.6	56.3
Emotional and mental health	67.8	64.7	STD prevention	62.8	62.8
Environmental health	53.2	52.4	Suicide prevention	74.2	70.8
First aid	61.2	61.2	Sun safety	53.6	50.7
Growth and development	51.1	49.4	Tobacco-use prevention	60.4	60.9
HIV prevention	64.2	62.6	Violence prevention	74.6	78.2

Table 15. Percentage of Schools in Which the **Lead Health Education Teacher Received Staff Development During the Preceding 2 Years, by Specific Teaching Method**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Teaching students with physical or cognitive disabilities	31.4	42.3
Teaching students of various cultural backgrounds	21.4	36.2
Teaching students with limited English proficiency	3.5	18.3
Using interactive teaching methods	50.5	54.7
Encouraging family or community involvement	31.6	32.9
Teaching skills for behavior change	46.0	46.0

Table 16. Percentage of Schools in Which the **Lead Health Education Teacher Wanted Staff Development, by Specific Teaching Method.** [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Teaching students with physical or cognitive disabilities	57.9	62.5
Teaching students of various cultural backgrounds	43.6	54.5
Teaching students with limited English proficiency	34.8	52.6
Using interactive teaching methods	63.3	60.4
Encouraging family or community involvement	66.2	65.9
Teaching skills for behavior change	78.2	74.8

Table 17. Percentage of Schools That **Required Physical Education in Grades 6-12 and, Among Those Schools, Percentage That Allowed Students to Be Exempted from Required Physical Education.** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Required physical education	100.00	98.2
<i>Reason for exemption from required physical education:</i>		
Enrolled in another course*	0.4	4.9
Participated in school sports	1.3	5.1
Participated in other school activities**	0.0	6.0
Participated in community sports activities	0.8	2.0

* Such as math or science.

** Such as ROTC, marching band, chorus, or cheerleading.

Table 18. Percentage of Schools That **Offered Intramural Activities or Physical Activity Clubs for Students and, Among Those Schools, Percentage That Provided Transportation Home from Intramural Activities.** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Offered intramural activities or physical activity clubs	58.1	68.5
Provided transportation home	9.7	32.3

Table 19. Percentage of Schools That **Implemented School-Based Asthma Management Activities.** [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Assured immediate access to medication	88.7	91.8
Had full-time registered nurse	10.9	41.2
Identified and tracked students with asthma	65.4	82.8
Obtained and used an Asthma Action Plan	31.6	56.4
Provided intensive case management for students with asthma	22.4	34.1
Educated school staff about asthma	49.0	51.9
Educated students with asthma about asthma management	29.3	46.8
Taught asthma awareness to all students	28.4	24.8
Encouraged full participation in physical education and physical activity	94.3	95.5
Modified physical education and physical activities	76.1	81.8

Table 20. Percentage of Schools* In Which **Students Could Purchase Selected Items from Vending Machines or at the School Store, Canteen, or Snack Bar.** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Chocolate candy	64.9	67.3
Other kinds of candy	67.9	70.0
Salty snacks not low in fat (such as regular potato chips)	60.2	79.1
Salty snacks low in fat (such as pretzels, baked chips, or other low-fat chips)	60.6	79.4
Fruits or vegetables	19.8	39.9
Low-fat baked goods	41.1	62.3
Soft drinks, sports drinks, or fruit drinks	96.8	95.3
100% fruit juice	80.2	79.3
Bottled water	82.8	90.3

*Among schools which allowed students to purchase snack foods or beverages from vending machines or at the school store, canteen, or snack bar.

Table 21. Percentage of Schools with a **Policy That Prohibited Tobacco Use and, Among Those Schools, the Percentage That Designated an Individual to Enforce the Policy and the Percentage That Had an "Ideal" Tobacco-Use Prevention Policy.*** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Had a policy prohibiting tobacco use	100.00	99.1
Had an individual to enforce the policy	70.0	62.4
Had an "ideal" tobacco-use prevention policy	28.7	45.9

*An "ideal" tobacco-use policy, as described in CDC's *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction*, prohibits all tobacco use by students, all school staff, and visitors on school property, in school vehicles, and at school-sponsored functions away from school property.

Table 22. Percentage of Schools That **Sometimes, Almost Always, or Always Took Specific Actions When Students Were Caught Smoking Cigarettes.** * [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Referred to school counselor	79.8	77.1
Referred to school administrator	100.00	99.4
Encouraged to participate in a program (an assistance, education, or cessation program)	60.9	64.9
Required to participate in a program (an assistance, education or cessation program)	44.8	35.0
Referred to legal authorities	82.2	46.1
Placed in detention	59.0	56.2
Given in-school suspension	72.4	69.7
Suspended from school	72.2	76.5
Informed parents or guardians	100.00	99.1

*Among schools with a policy prohibiting tobacco use.

Table 23. Percentage of Schools That **Prohibited Tobacco Advertising in Specific Places, Through Sponsorship of School Events, and on Student Apparel.** [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Prohibited tobacco advertising in specific locations (in school buildings, on school grounds, on school buses, and in school publications)	92.2	93.0
Prohibited tobacco sponsorship of school events	91.2	92.2
Prohibited students from wearing tobacco brand-name apparel	95.7	92.4

Table 24. Percentage of Schools That **Implemented Safety and Security Measures**. [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Required visitors to report to main office	98.8	99.6
Maintained a closed campus	39.5	84.1
Used staff to monitor halls	86.3	87.6
Checked bags, desks, and lockers	41.2	41.4
Prohibited backpacks	20.3	25.8
Required school uniforms	0.0	3.7
Required student identification badges	1.3	5.5
Used metal detectors	2.2	4.3
Had informed police	17.9	44.7

Table 25. Percentage of Schools With a **Written Policy on HIV-Infected Students or School Staff, and Among Those Schools, Percentage That Addressed Specific Topics**. [School Health Profiles, Principals' Surveys, 2002]

	Montana	National
Had a written policy	70.9	67.8
<i>Topic addressed by a written policy:</i>		
Attendance of students with HIV infection	90.5	90.2
Protection from discrimination for HIV-infected students and staff members	94.7	96.0
Maintenance of confidentiality for HIV-infected students and staff members	97.7	98.4
Worksite safety	95.1	97.8
Confidential counseling for HIV-infected students	79.4	77.5
Communication of policy to students, school staff, and parents	86.6	85.1
Training for school staff about HIV infection	81.5	84.4
Procedure for implementing the policy	87.9	89.6

Table 26. Percentage of Schools That **Involved Parents and Families in Health Education Activities**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Provided families with information on the health education program	56.9	69.5
Met with PTA/PTO to discuss the health education program	14.5	20.3
Invited family members to attend a health education class	33.5	35.5

Table 27. Percentage of Schools in Which **Students Participated in Health-Related Community Activities in a Required Health Education Course**. [School Health Profiles, Teachers' Surveys, 2002]

	Montana	National
Performed volunteer work*	10.2	14.6
Attended a health fair	25.5	28.3
Gather information §	41.2	54.5
Compared prices §§	16.7	25.0
Identified potential injury sites ⁺	44.4	51.4
Analyzed advertising ⁺⁺	60.3	66.9
Advocated for health-related issues	49.3	47.4
Completed homework with family members	72.0	78.3

* At a hospital, a local health department, or other community organization that addresses health issues.

§ About health services available in the community.

§§ Visited a store to compare prices of health products.

+ At school, home or in the community.

++ Advertising in the community that was designed to influence health behaviors or health risk behaviors.